

AFFIDAVIT OF CORRECTION TO BIRTH RECORD

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

✓ 73

Enter Correct Information Concerning Person Whose Birth Record Is Being Amended	REGISTRANT'S FULL NAME AT BIRTH ANNIE LUE LEWIS			STATE FILE OR BIRTH NUMBER 15-039225	
	BIRTH DATE	Month Day Year DECEMBER 1, 1915	BIRTH PLACE	City or Town EDGEFIELD	County State S.C.
ITEMS TO BE AMENDED OR CORRECTED	ITEM OMITTED OR IN ERROR			BIRTH CERTIFICATE SHOWS	
	MIDDLE NAME			ANNIE MAY LEWIS	
	Date of birth			Nov. 30, 1915	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT: SIGNATURE OF PARENT (OR OTHER) <i>Annie Lue Brown</i>				RELATIONSHIP SELF
	NOTARY SUBSCRIBED AND SWORN TO BEFORE ME ON AUGUST 22 19 75				NOTARY COMMISSION EXPIRES 09-16 19 78

DO NOT WRITE BELOW THIS LINE

ABSTRACT of Supporting Evidence (for health dept. use)

	NAME AND KIND OF DOCUMENT (INCLUDING BY WHOM ISSUED AND DATE OF ISSUE)	DATE ORIGINAL DOCUMENT WAS MADE
1	THE BALTIMORE LIFE INS. POL. #M.360687 - BALTIMORE, Md.	01-01-64
2	APPL. FOR INS. FORM #360 (THE BALTIMORE LIFE INS.) BALTIMORE, Md.	01-01-64
3		

INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE

1	ANNIE LUE
2	12-01-15
3	

DHEC No. 613
Rev. 11/73

ADDITIONAL INFORMATION

I certify that I have examined the documents referred to above, that they show no changes or erasures, and appear to be authentic.	ASSISTANT STATE REGISTRAR <i>David M. Bryan</i>	EVIDENCE REVIEWED BY <i>William D. Reese</i>	DATE FILED 10-10-75
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